

REPORT OF RECEIPTS AND DISBURSEMENTS FOR A COMMITTEE OR ORGANIZATION SUPPORTING A NOMINATING CONVENTION (Summary Page)

1. (a) Name of Committee (in full) 2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.	2. FEC Identification Number C00435560
(b) Address (Number and Street) 430 South Capitol Street SE	3. Type of Committee/Organization <input checked="" type="checkbox"/> Convention Committee <input type="checkbox"/> Host Committee <input type="checkbox"/> Other _____ (specify)
(c) City, State, and ZIP Code Washington DC 20003	

4. TYPE OF REPORT (check appropriate box(es))

(a) ☐ POST-CONVENTION REPORT
☐ QUARTERLY REPORT (check one) ☒ April 15 ☐ July 15 ☐ October 15 ☐ January 31
☐ FINAL REPORT

(b) Is this an Amendment ? ☒ YES ☐ NO

SUMMARY OF RECEIPTS AND DISBURSEMENTS

5. Covering period	FROM: 01/01/2010	THROUGH: 03/31/2010
--------------------	------------------	---------------------

SECTION A - CASH BALANCE SUMMARY	Column A This period	Column B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2010</u>		18978.43
(b) Cash on Hand at Beginning of Reporting Period	18978.43	
(c) Total Receipts (From Line 20)	0.00	0.00
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and 6(a) and 6(c) for Column B)	18978.43	18978.43
7. Total Disbursements (From Line 25)	14781.42	14781.42
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	4197.01	4197.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D)	0.00	
SECTION B - SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS		
11. Convention Expenditures (from line 21(c))	14781.42	14781.42
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))	0.00	0.00
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)	14781.42	14781.42
(b) Expenditures from Prior Years Subject to Limitation	16801781.57	16801781.57
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		16816562.99

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct, and complete.

Bradley Marshall

07/09/2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C., 437g.

For Further
Information
Contact:

Federal Election Commission
Toll Free 800/424-9530
Local 202/694-1100

FE1AN056

FEC FORM 4 (Revised 1/2001)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS
(PAGE 2 of FEC Form 4)

Name of committee (in full) 2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.		Report Covering the Period FROM: 01/01/2010 TO: 03/31/2010	
RECEIPTS	Column A This period	Column B Calendar Year-to-Date	
13. Federal Funds (Itemize all on Schedule A)	0.00	0.00	
14. Contributions to Defray Convention Expenses:			
(a) Itemized (Use Schedule A)	0.00		
(b) Unitemized	0.00		
(c) Subtotal of Contributions to Defray Convention Expenses (Add Lines 14(a) and 14(b))	0.00	0.00	
15. Transfers from Affiliated Committees	0.00	0.00	
16. Loans and Loan Repayments Received (Add Lines 16(a) and 14(b))			
(a) Loans Received	0.00		
(b) Loan Repayments Received	0.00		
(c) Subtotal of Loans and Loan Repayments Received (add Line 14a and 14b)	0.00	0.00	
17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures:			
(a) Itemized (Use Schedule A)	0.00		
(b) Unitemized	0.00		
(c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (Add Lines 17(a) and 17(b))	0.00	0.00	
18. Other Refunds, Rebates, Returns of Deposits:			
(a) Itemized Other Refunds, Rebates, Returns of Deposits	0.00		
(b) Unitemized Other Refunds, Rebates, Returns of Deposits	0.00		
(c) Subtotal of Refunds, Rebates, Returns of Deposits (Add Lines 18(a) and 18(b))	0.00	0.00	
19. Other Income			
(a) Itemized (Use Schedule A)	0.00		
(b) Unitemized	0.00		
(c) Subtotal of Other Income (Add Lines 13, 14(c), 15, 16(c), 17(c), 18 (c) and 19(c))	0.00	0.00	
20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15(c), 16(c), 17(c), 18(c) and 19(c))	0.00	0.00	
DISBURSEMENTS			
21. Convention Expenditures:			
(a) Itemized (Use Schedule B)	14781.42		
(b) Unitemized	0.00		
(c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b))	14781.42	14781.42	
22. Transfers to Affiliated Committees	0.00	0.00	
23. Loans and Loan Repayments Made			
(a) Loans Made	0.00		
(b) Loan Repayments Made	0.00		
(c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	0.00	0.00	
24. Other Disbursements:			
(a) Itemized (Use Schedule B)	0.00		
(b) Unitemized	0.00		
(c) Subtotal of Other Disbursements (Add Lines 24(a) and 24(b))	0.00	0.00	
25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c))	14781.42	14781.42	

SCHEDULE B (FEC Form 4)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21a ☐ 22 ☐ 23a ☐ 23b ☐ 24a

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.

A.	Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSING	Transaction ID: SB21A.4199 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0
	Mailing Address P. O. BOX 9001006	
	City State Zip Code LOUISVILLE KY 40290	Amount of Each Disbursement this Period -0.01
	Purpose of Disbursement VOID CHECK	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSING	Transaction ID: SB21A.4210 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0
	Mailing Address P. O. BOX 9001006	
	City State Zip Code LOUISVILLE KY 40290	Amount of Each Disbursement this Period -326.17
	Purpose of Disbursement VOID CHECK	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA	Transaction ID: SB21A.4207 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0
	Mailing Address REGIONAL CENTER, VA2-125-04-01 P.O. BOX 27025	
	City State Zip Code RICHMOND VA 23261	Amount of Each Disbursement this Period 57.13
	Purpose of Disbursement BANK CHARGES	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
SUBTOTAL of Disbursements This Page (optional)		-269.05
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 4) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA</p> <p>Mailing Address REGIONAL CENTER, VA2-125-04-01 P.O. BOX 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement BANK CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4213</p> <p>Date of Disbursement <div> <div>02</div> <div>16</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>57.42</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA</p> <p>Mailing Address REGIONAL CENTER, VA2-125-04-01 P.O. BOX 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement BANK CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4214</p> <p>Date of Disbursement <div> <div>03</div> <div>15</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>58.39</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) BANK OF AMERICA,NA</p> <p>Mailing Address REGIONAL CENTER, VA2-125-04-01 P.O. BOX 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement BANK CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4219</p> <p>Date of Disbursement <div> <div>03</div> <div>15</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>10.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

125.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 4) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CAREFIRST BLUECROSS BLUESHIELDS</p> <hr/> <p>Mailing Address P. O. BOX 79749</p> <hr/> <p>City BALTIMORE State MD Zip Code 21279</p> <hr/> <p>Purpose of Disbursement VOID CHECK</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4211</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 1</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period</p> <div>-1270.38</div>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CAREFIRST BLUECROSS BLUESHIELDS</p> <hr/> <p>Mailing Address P. O. BOX 79749</p> <hr/> <p>City BALTIMORE State MD Zip Code 21279</p> <hr/> <p>Purpose of Disbursement VOID CHECK</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4212</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 1</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period</p> <div>-1270.38</div>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) LEAH D. DAUGHTRY</p> <hr/> <p>Mailing Address 700 SEVENTH ST., S.W. #201</p> <hr/> <p>City WASHINGTON State DC Zip Code 20024</p> <hr/> <p>Purpose of Disbursement CONVENTION CONSULTING FEES</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4208</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 1</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period</p> <div>19078.00</div>

SUBTOTAL of Disbursements This Page (optional)

16537.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 4) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.

<p>A. Full Name (Last, First, Middle Initial) FANCESCA GAGE</p> <p>Mailing Address 1841 COLUMBIA RD, NW APT. #511</p> <p>City State Zip Code WASHINGTON DC 20009</p> <p>Purpose of Disbursement VOID CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4205</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 1</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>-0.96</div> </p>
<p>B. Full Name (Last, First, Middle Initial) SHANE GREIGO</p> <p>Mailing Address 3180 S. HALIFAX STREET</p> <p>City State Zip Code AURORA CO 80013</p> <p>Purpose of Disbursement VOID CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4202</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 1</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>-976.89</div> </p>
<p>C. Full Name (Last, First, Middle Initial) SHANE GREIGO</p> <p>Mailing Address 3180 S. HALIFAX STREET</p> <p>City State Zip Code AURORA CO 80013</p> <p>Purpose of Disbursement VOID CHECK</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21A.4204</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 1</div> <div>2 0</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>-497.26</div> </p>

SUBTOTAL of Disbursements This Page (optional)

-1475.11

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 4)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

2008 DEMOCRATIC NATIONAL CONVENTION COMMITTEE INC.

A.

Full Name (Last, First, Middle Initial)

GUARDIAN

Mailing Address

P.O.BOX 95101

City

CHICAGO

State

IL

Zip Code

60694

Purpose of Disbursement

VOID CHECK

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21A.4209

Date of Disbursement

Amount of Each Disbursement this Period

-136.51

B.

Full Name (Last, First, Middle Initial)

C. ANTHONY JACKSON

Mailing Address

P.O. BOX 383

City

RIBERA

State

NM

Zip Code

87560

Purpose of Disbursement

VOID CHECK

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21A.4200

Date of Disbursement

Amount of Each Disbursement this Period

-0.96

SUBTOTAL of Disbursements This Page (optional)

-137.47

TOTAL This Period (last page this line number only)

14781.42